October, 1955 Vol. XVI, No. 10

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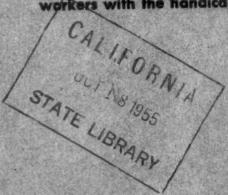


The Library does not stock for sale publications indexed in this issue. Orders should be sent directly to the publisher, or, in the case of books, through the local bookstore. The addresses of authors of periodical articles are given, when known, in parentheses following their names.

The publications indexed in this issue have been added to the loan collection of the Library, which extends its loan services to organizations and individuals whose local resources are so limited as to make information otherwise unavoilable.

Bulletin
on Current
Literature

The monthly bibliography for workers with the handicapped



The NATIONAL SOCIETY

CRIPPLED CHILDREN and Adults, Inc.
11 50. LA BALLE ST., CHICAGO & BL.

Now in the 34th Year of Service

The NATIONAL SOCIETY



for

CRIPPLED CHILDREN and ADULTS

Founded in 1921, the National Society for Crippled Children and Adults, the Easter Seal Society, is a nationwide federation of fifty-two state and territorial societies dedicated to the purpose of helping crippled children and adults. This objective is implemented through a three-fold program:

Education of the public as a whole, of professional persons concerned with the care and treatment of the crippled, of the families of the crippled, particularly parents, and of volunteers and employers.

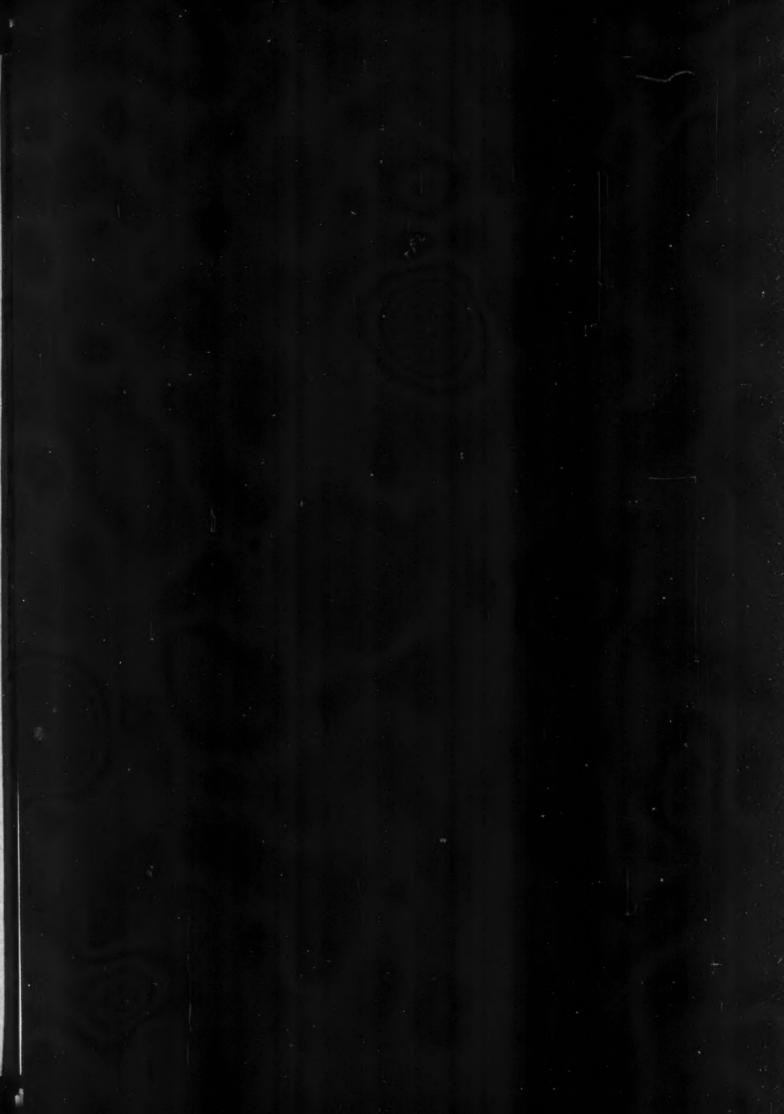
Research to provide increased knowledge of the causes and prevention of crippling, and of improved methods of care, education and treatment of crippled children and adults.

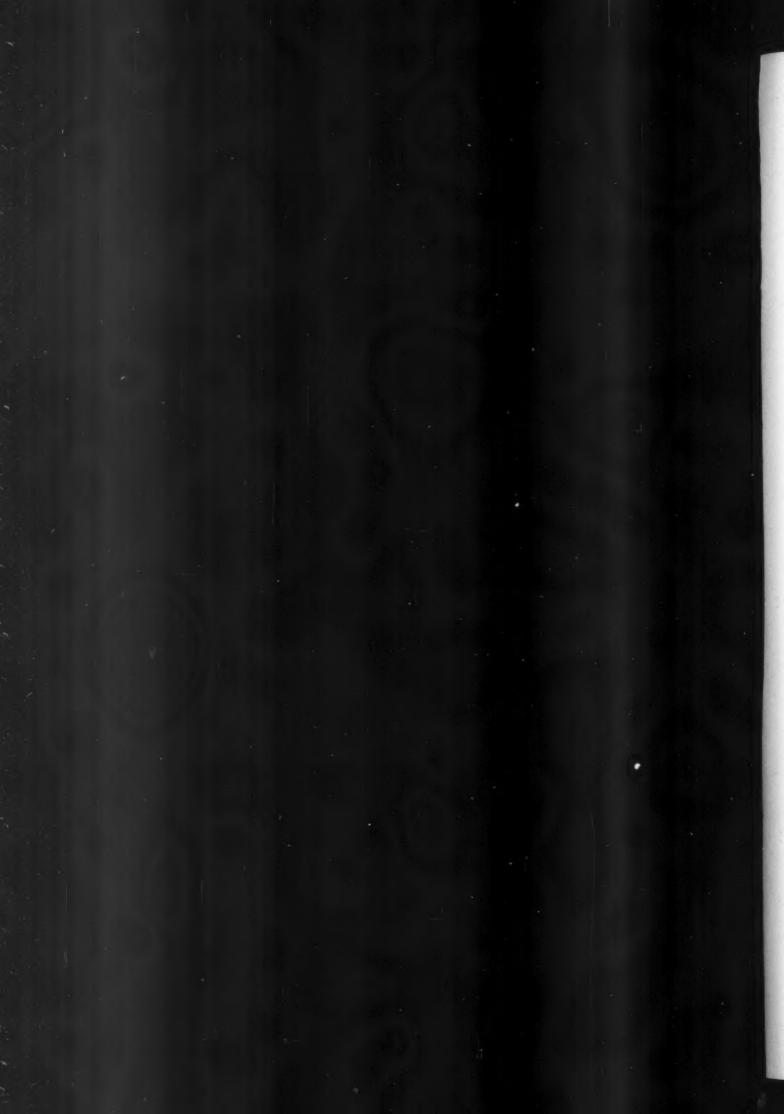
Direct services to improve the health, welfare, education, recreation and employment opportunities for the crippled, toward the goal of rehabilitation.

IMMEDIATE PROGRAM AND SERVICES
Services are determined by unmet needs, existing facilities, resources of the Society

and availability of trained personnel and include case finding, diagnostic clinics, medical care, physical, occupational, and speech therapy, treatment centers, rehabilitation centers and curative workshops, mobile clinics, special education, social service, psychological services, sheltered workshops and homebound employment, promotion of employment opportunities for the crippled, recreation, and provision of equipment and prosthetic devices.

The National headquarters provides professional consultation in program planning and community organization to state and local member societies. It maintains liaison with medical specialty groups, offers legislative guidance, a nationwide lending library devoted to literature on handicapping conditions, and a free national personnel registry and employment service which recruits and refers professional workers. It also has an active program of professional education, including scholarships and fellowships, summer workshops for training of professional personnel, exhibits at professional meetings and the publication and distribution of printed materials.





New Addition to the Library's Periodical Collection

Rehabilitation Events, National Tuberculosis Association, 1790 Broadway, New York 19, N. Y. Vol. 1, no. 1, August, 1955. To be "issued periodically." Apply.

AMPUTATION -- SPECIAL EDUCATION

1009. Simpson, Roy E.

Some children require special help. Calif. Teachers Assn. J. Sept., 1954. 50:6:26-27.

Two case histories of children with amputations—one caused by accident, the other congenital—illustrate some of the serious emotional and social adjustment problems confronting the child amputee. The teacher is able through a specially planned curriculum to set tasks for the child in which he can succeed, at least to a degree. With improvement, the child can be assigned more difficult work which will challenge his abilities and encourage growth.

APHASIA

1010. Cariri, Benjamin A. (Inst. of Logopedics, Univ. of Wichita, Wichita, Kans.)

The occurrence of chronic aphasia in the left hemiplegia of adults.

Cerebral Palsy Rev. 16:4:16-18, 26.

In order to test the hypothesis that speech and language may be the function of the left cerebral hemisphere only, 104 aphasic subjects were studied. It was found that at least 10 showed involvement of the right cerebral hemisphere which lends support to the theory that almost always there will be aphasia if the injury is in the dominant hemisphere, be it right or left. The writer reports, therefore, that there is strong evidence that speech and language may be functions of the right as well as left hemisphere.

ARCHITECTURE -- BIBLIOGRAPHY

1011. National Society for Crippled Children and Adults (11 S. La Salle St., Chicago 3, Ill.)

A brief checklist of available publications relating to architectural planning for the physically handicapped. Chicago, The Society, 1955. 3 p. (Architectural planning bul. 2; rev. Aug., 1955) Mimeo.

A listing of books and pamphlets known to be in print and available from the distributing agencies whose addresses are included in the references. Included are references of a general nature, publications on rehabilitation facilities, housing, and schools. Available from the Library, National Society for Crippled Children and Adults.

ARTHRITIS--ETIOLOGY

1012. Stecher, Robert M. (3395 Scranton Rd., Cleveland 6, Ohio)

Familial occurrence of ankylosing spondylitis, by Robert M. Stecher and A. H. Hersh. Brit. J. Phys. Med. Aug., 1955. 18:8:176-183.

"Heredity plays an important role in the aetiology of ankylosing

ARTHRITIS -- ETIOLOGY (continued)

spondylitis as shown by the numerous reported cases of multiple involvement in sibships and at least 3 pairs of concordant identical twins. The analysis by inspection of significant pedigrees and numerical tests on pooled data lead to the conclusion that ankylosing spondylitis is due to an autosomal dominant factor which has about 70 per cent penetrance in males and about 10 per cent or slightly greater penetrance in females.... In sibships containing affected women there is a stabilizing effect upon penetrance making it almost complete in both sexes; this seems to be especially the case where the mother has ankylosing spondylitis."-- Summary.

ARTHRITIS -- MEDICAL TREATMENT

1013. Bunnell, Sterling (516 Sutter St., San Francisco 2, Calif.)

Surgery of the rheumatic hand. J. Bone and Joint Surgery. July, 1955. 37-A:4:759-766, 808.

Surgical methods for the correction of deformities of the hand resulting from rheumatoid arthritis are discussed. Dr. Bunnell stresses the
necesstiy of early preventive treatment of arthritic contractures of the
hand in stages where conservative methods are not only of avail, but
where the results obtained are far superior to any operative achievement
accomplished in later stages. A discussion of Dr. Bunnell's paper by
Dr. Arthur Steindler is appended.

1014. Lowman, Edward W. (Dept. of Physical Medicine and Rehab., N. Y. Univ. Coll. of Medicine, 477 First Ave., New York, N. Y.)

Rehabilitation of the chronic rheumatoid arthritic: a two-year progress report. Archives of Physical Med. and Rehabilitation. July, 1955. 36:7:431-434.

A report of a research program at Goldwater Memorial Hospital, consisting of 25 beds staffed with a rheumatologist, psychiatrist, psychologist, psychiatric social worker, nurse and physical and occupational personnel. Of the 38 patients treated, 18 were severely disabled, and of these 14 have been discharged, 7 being totally self-sufficient and 1 as job-placed. "The other 7 have been discharged partially self-sufficient with an average increase of 26% in functional capacity. Four patients of the group remain custodial hospital cases; among these there has been a 20% increase in function." Of the 20 less severely disabled, all were discharged, 15 as totally self-sufficient while the remaining partially so with an average increase of 29% in function. Seven of these 20 have been placed in full-time jobs.

1015. Lowman, Edward W. (400 E. 34th St., New York, N.Y.)

Total rehabilitation of the rheumatoid arthritic cripple. by

Total rehabilitation of the rheumatoid arthritic cripple, by Edward W. Lowman, Philip R. Lee, and Howard A. Rusk. J. Am. Med. Assn. August 13, 1955. 158:15:1335-1344.

A report based on findings of the first two years' experience with a group of rheumatoid arthritic patients treated at Goldwater Memorial Hospital, New York, with a combined cortisone and rehabilitation program. Method of treatment and evaluation, results and the problems inherent in maintaining the functional gains brought about by treatment are discussed.

AUDIOMETRIC TESTS See 1046.

BLIND

1016. Pinkerton, Grace

Learning to live with blindness. Nursing Outlook. Aug., 1955. 3:8:432-435.

As a result of glaucoma, a nurse loses her sight at 58 years of age; this article tells of her reactions to the handicap, her instruction at the Southwest Rehabilitation Center for the Adult Blind, Little Rock, and her adjustment to blindness. The program of training at the Center is described.

See also 1041.

BLIND -- ETIOLOGY

1017. Gt. Brit. Medical Research Council

Retrolental fibroplasia in the United Kingdom; a report to the... by their Conference on retrolental fibroplasia. Brit. Med. J. July 9, 1955. 4931:78-82.

In same issue: Incidence of retrolental fibroplasia in England and Wales in 1951, by J. T. Boyd and K. M. Hirst, p. 83-85.-Retrolental fibroplasia (an editorial), p. 110-111.

In a study of 1,095 babies weighing 4 pounds or under at birth, 84 of whom were affected with retinopathy, the following conclusions emerge: The cause of prematurity and maternal factors other than vaginal bleeding did not influence the subsequent development of the disease. Boys were more often affected than girls. The nurseries showed wide variations in their use of oxygen and, in general, corresponding variations in the incidence of the disease. The use of oxygen predisposed to the development of retinopathy. Except in two cases, at least five days' treatment with oxygen was required to produce the disease. Nurseries in which little oxygen was given, and which were free from cases of progressive retinopathy, did not on the average, experience survival rates inferior to nurseries using more oxygen. Clinical signs of anoxia at and after birth were associated with a higher incidence of retinopathy, but on the average more oxygen was given to anoxic babies.

BLIND--MENTAL HYGIENE

1018. Cole, Nyla J. (Utah Child Guidance Center, Univ. of Utah Coll. of Med., Salt Lake City, Utah)

The psychological problems of the congenitally blind child; workshop, 1954, by Nyla J. Cole and Leonard H. Taboroff. Am. J. Orthopsychiatry. July, 1955. 25:3:627-643.

In diagnosis and therapy the congenitally blind present three kinds of problems: 1) their interpersonal impact, 2) the effects blindness may have on personality and emotional development, and 3) the problem of semantics. The case of a 16-year old girl, presented here, illustrates all of these factors. Dr. Cole shows how the regressive withdrawal of a blind girl could be combated by psychotherapy of patient and parent.

BLIND--SPEECH CORRECTION See 1039.

BRAIN INJURIES See 1037.

BRAIN INJURIES -- MENTAL HYGIENE

1019. Greer, G. Irene (Hermann Hosp., 1203 Ross Sterling Ave., Houston 25, Tex.)

Motivation of the brain damaged patient. Am. J. Occupational Therapy. July-Aug., 1955. 9:4:156-157, 168.

"Motivation is an emotion and we can influence it only as we relate to an individual personality. If we are to hope for success then, we must have some understanding of the changes and stresses put upon personality by insult to brain tissues." The basis for establishing rapport with the patient and the goals that may be set by the therapist and patient are briefly discussed.

CANCER--MENTAL HYGIENE--BIBLIOGRAPHY

1020. U. S. National Institutes of Health. Library. (Natl. Institutes of Health, Bethesda 14, Md.)

Psychology of the patient with cancer; a selection of references, 1950-1954, compiled by Charlotte Kenton, January, 1955. Bethesda, Md., The Library, 1955. 6 p. Mimeo.

References included are listed under the subject headings of psychological problems of malignancy, what to tell the patient, psychological etiology of malignancy, and social casework--rehabilitation. Entries are mainly periodical articles.

CANCER--SOCIAL SERVICE

1021. Harvey, Florence (622 W. 168th St., New York 32, N.Y.)

Some social aspects in the care of patients undergoing breast surgery. Medical Social Work. July, 1955. 4:3:99-110. Reprint.

This practical, comprehensive article reflects the experience of the author as a caseworker in the surgical service of The Presbyterian Hospital, New York City, where in 25 years she worked with hundreds of patients.

CEREBRAL PALSY

1022. Polani, Paul E. (Keat's House, Guy's Hosp., London Bridge, S. E. 1, London, England)

The spastic child. The Practitioner. Apr., 1955. 174:385-393. 11 p. Reprint.

From: Symposium on the Handicapped Child.

Discusses frequency and classification of cerebral palsy as it is found in Great Britain, etiology, associated handicaps, general diagnosis and physical examination, types and natural history of cerebral palsy, and briefly, problems in the management of the cerebral palsied child and his family. Also included is a list of organizations in Great Britain which can be helpful to the doctor and family in dealing with cerebral palsy cases.

CEREBRAL PALSY--ARGENTINA

1023. Argentina. Centro de Rehabilitacion de Ninos Espasticos (Director, Dr. Jaime Citrinovitz, Avelino Diaz 861, Buenos Aires, Argentina)

Symposium sombre paralisis cerebral infantil, 2 de Octubre, 1953.

Buenos Aires, Centro de Rehabilitacion de Ninos Espasticos, 1955. 38 p.

Primer ateneo extraordinario celebrado con los auspicios de... Servicio de Ortopedia y Traumatologia y Asociacion Pro-Ayuda al Nino Espastico.

Contents: Palabras por el Director del Policinico Rawson, Dr.
Joaquin A. Da Rocha. -Importancia medico-social del problema del nino
paralitico cerebral, Drs. Jaime Citrinovitz y Juan Carlos Venturo. Papel de la ortopedia en el tratameinto del paralitico cerebral, Dr. Jose
Alberto Pique. - Actitud del pediatra frente a la paralisis cerebral infantil,
Drs. Ovidio H. Senet y Frederico D. Citon. -Importancia de la foniatria
en el tratamiento de le paralisis cerebral, Dr. Renato Segre. - Aspectos
neurologicos de la paralisis cerebral, Dr. Juan Rodenstein. - La neurocirugia en el tratamiento del paralitico cerebral, Drs. Hugo N. Usarralde
y Eduardo Saint-Martin. - Kinesiologia y paralisis cerebral infantil,
Alberto Perez. - Palabras finales, Dr. Jaime Citrinovitz.

CEREBRAL PALSY--DIAGNOSIS

1024. Balf, C. L. (Dept. of Child Life and Health, Univ. of Edinburgh, Edinburgh, Scotland)

Problems in the classification of cerebral palsy in childhood, by C. L. Balf and T. T. S. Ingram. Brit. Med. J. July 16, 1955. 4932:163-166.

In same issue: Cerebral palsy (an editorial), p. 187-188.

"There is a need for a standard terminology and for a classification which can be employed successfully by all those engaged in the treatment of affected children. The present article presents a neurological classification which we have found useful and compares it to a number of older and contemporary classifications."--Author.

In the Edinburgh survey by Ingram the incidence was found to be 2 to 2.5 cases per 1000. The editorial reviews the problems of determining the pathology and etiology, reporting briefly recent studies.

1025. Breakey, Arnold S. (708 Park Ave., New York, N.Y.)

Ocular findings in cerebral palsy. Arch. Ophthalmology. June, 1955. 53:852-856. Reprint.

In a series of 100 unselected patients with congenital cerebral palsy, 56% showed ocular defects. Distribution of normal and abnormal ocular findings indicated the various defects could occur in any of the three groups--spastic, dyskinesic, and ataxic. Abnormalities of muscle balance were found to be most prominent. Management by treatment and surgery is described, with results. The author, citing Perlstein, states that any child with eye abnormalities at birth must be considered to have brain damage until it is proved otherwise and deserves a complete neurologic examination to rule out cerebral palsy.

CEREBRAL PALSY--DIAGNOSIS (continued)

1026. Guibor, George P. (30 N. Michigan Ave., Chicago, Ill.)

Cerebral palsy; a practical routine for discerning oculomotor defects in cerebral palsied children. J. Pediatrics. Sept., 1955. 47:3:333-339.

Presents a few simple tests which will aid the examiner to ascertain the presence of ocular motor defects or of subnormal vision. Since ocular defects exist in over 50 per cent of patients with cerebral palsy resulting from central nervous system derangement, they should be detected before degeneration of vision occurs. Early treatment will develop vision and may improve general motor ability, especially in patients with athetosis or ataxia.

CEREBRAL PALSY--EMPLOYMENT

1027. Vaughan, V. H.

Training, placement and aftercare for the cerebral palsied child.

Spastics' Quart. June, 1955. 4:2:10-13.

"Here in South Africa we have followed the pattern found in overseas countries, in that first and foremost attention is given to the education and therapeutic treatment of the child. Only later has attention been directed to the question of training and employment. In our country the accent is still on education and treatment, and remarkable success has been obtained, but the day has already come when the aspect of employment must receive attention. "--Author. Open industry, sheltered and home employment are briefly considered. A paper given at the First National Conference on Cerebral Palsy, Johannesburg, South Africa.

CEREBRAL PALSY--ETIOLOGY

1028. Bourne, J. G. (St. Thomas's Hospital, London, S. E. 1, England)

Dental gas and cerebral palsy. Lancet. Aug. 6, 1955. 269:6884:
295.

A letter to the Editor.

Some notes of the author which illustrate the effects of dental gas on patients anesthetised for tooth extractions. Many patients have remained in a coma and two are known to have suffered cerebral damage. The anesthetic used in all cases was nitrous oxide and oxygen. In the author's opinion, the evidence suggests that some of the cerebral palsies hitherto unexplained may in fact be the result of dental gas.

CEREBRAL PALSY--INSTITUTIONS

1029. Hanna, Ralph (108 W. 30th St., Austin, Tex.)

The function of a cerebral palsy treatment center. Cerebral Palsy Rev. July-Aug., 1955. 16:4:5-8, 23.

The scope and responsibilities of a center, and the personnel and their functions, are discussed by the Director of the Children's Medical Center of Austin.

CEREBRAL PALSY--INSTITUTIONS--SOUTH AFRICA

1030. Murray, C. H. deC. (Elizabeth Canradie School, P. O. Diskobolos, Kimberley, S. Africa)

Cerebral palsy in South Africa; a programme. S. African Med. J. July 23, 1955. 29:30:702-706.

Suggestions for a central cerebral palsy diagnostic and treatment

CEREBRAL PALSY--INSTITUTIONS--SOUTH AFRICA (continued)

center in South Africa are outlined; the program would include treatment, training and education for European children. Variety of services, qualifications for personnel, admission criteria, provisions for medical services and prosthetic appliances, dormitory facilities and nursing care, and educational opportunities are discussed. Estimates of probable cases in the South African European population are given.

CEREBRAL PALSY--MEDICAL TREATMENT

1031. Denhoff, Eric (24 Meeting St., Providence 3, R. I.)

The effectiveness of chlorpromazine (Thorazine) with cerebral palsied children, by Eric Denhoff and Raymond H. Holden. J. Pediatrics. Sept., 1955. 47:3:328-332.

"Chlorpromazine was evaluated for its physical and behavioral effects on eighteen cerebral palsied children. Improvement was found in 50 per cent of the children, a significantly greater improvement than when the children were merely receiving a placebo. Of four children rated as having 'body anxiety,' all (100 per cent) showed improvement. Both intelligent and mentally deficient children showed increased relaxation and lessened anxiety, were happier, less irritable, and easier to manage. There were no toxic effects noted, clinically or by laboratory studies. "--Summary and conclusions.

CEREBRAL PALSY--MENTAL HYGIENE

1032. Duncan, Melba Hurd (St. Francis Hosp., 825 E. Pikes Peak Ave.,

Colorado Springs, Colo.)

Emotional aspects of the communication problem in cerebral palsy. Cerebral Palsy Rev. 16:4:19-23, 27.

Successful therapists working with children with communication difficulties have empathy, as well as knowledge and insight into the organic and emotional disturbances that may affect the speech processes. Case examples illustrate the psychodynamics that are present.

See also 1051;1081.

CEREBRAL PALSY--PARENT EDUCATION

1033. Denhoff, Eric (24 Meeting St., Providence 3, R. I.)

Understanding parents: one need in cerebral palsy, by Eric Denhoff and Raymond H. Holden. Cerebral Palsy Rev. July-Aug., 1955. 16: 4:9-11, 25.

"Understanding parents' needs as well as the child's needs is an important part of a successful habilitation program in cerebral palsy. This can be accomplished best through a planned program for parents based on an understanding not only of the developmental needs of their children, but their own need for being 'good' parents."—Conclusions and summary.

1034. Robertson, P. (Mrs.)

The parent and the cerebral palsied child. Spastics' Quart. June, 1955. 4:2:5-9.

Reviews the parents' role in the care and treatment of their cerebral palsied child. A paper given at the First National Conference on Cerebral Palsy, Johannesburg, South Africa.

CEREBRAL PALSY--PARENT EDUCATION (continued)

1035. Wortis, Helen Z. (Coordinating Council for Cerebral Palsy in New York City, 47 W. 57th St., New York 19, N.Y.)

Parents of children with cerebral palsy, by Helen Z. Wortis and Jeanette A. Margolies. Medical Social Work. July, 1955. 4:3:110-120.

In the experience of the authors "the tensions, anxieties, and personality disturbances met with in the parents of the cerebral palsied child were to a large extent the result of their reality problems. These reality problems were not only the difficulties in the physical care of a severely handicapped child, but were also the financial, housing, personal, and familial problems which rose out of the situation..."--Authors. This paper is based on a study of parents of 37 children in the special class at Public School 135.

CEREBRAL PALSY--PHYSICAL THERAPY

1036. Levitt, Sophie (Forest Town School for Cerebral Palsy, Johannesburg, S. Africa)

Physiotherapy in cerebral palsy today. Phys. Therapy Rev. Aug., 1955. 35:8:430-435.

A report of the author's observations of the physical therapy programs observed at the various cerebral palsy centers in the U. S. and England which she visited in 1953 and 1954. Read at the First National Conference on Cerebral Palsy in South Africa, Sept., 1954.

CEREBRAL PALSY--PSYCHOLOGICAL TESTS

1037. Berko, Martin J. (2300 Jardine Dr., Wichita 14, Kans.)

The measurement of intelligence in children with cerebral palsy: the Columbia Mental Maturity Scale. J. Pediatrics. Aug., 1955. 47: 2:253-260.

The psychological problems of brain-injured children with cerebral palsy are reviewed. From the author's experience with the Columbia test, the results of this test, like any other test, must be accepted with reservation with a careful consideration and recognition of the portion of the "brain-injured" syndrome presented by each child tested. The author finds that 60 to 70 per cent of all children examined at the Institute of Logopedics show two or more of the psychological involvements reviewed.

1038. Lamm, Stanley S. (20 Plaza St., Brooklyn 17, N.Y.)

The intellectual level in cerebral palsy. Cerebral Palsy Rev. July-Aug., 1955. 16:4:11, 26.

"There have been many studies reported on the mental development of children with cerebral palsy. It is the purpose of this paper to review a number of them...." 15 references.

CEREBRAL PALSY--RECREATION See 1073. CEREBRAL PALSY--SPEECH CORRECTION

1039. Egland, George O. (Western Michigan Coll. of Educ., Kalamazoo, Mich.)

Teaching speech to blind children with cerebral palsy. Cerebral

Palsy Rev. July-Aug., 1955. 16:4:12-15, 27.

"The idea that teaching speech to sightless children who have cerebral palsy is highly specialized and relatively inapplicable to other children is to be avoided." The special problems of the blind cerebral-palsied child are explained and the techniques and provisions that may be utilized in training and encouraging the child are discussed.

See also 1032.

CEREBRAL PALSY--STATISTICS

1040. Altman, Isidore (United Cerebral Palsy, 50 W. 57th St., New York 19, N. Y.)

On the prevalence of cerebral palsy. Cerebral Palsy Rev. July-Aug., 1955. 16:4:4, 25.

The conflicting estimates of the prevalence of cerebral palsy have resulted in confusion, compounded further by misinterpretation and misuse of the statistical data. The author, Statistical Consultant for UCPA, reviews the Phelp's formula and the Schenectady and Connecticut surveys to establish a basis for UCPA's estimates, which are based on a prevalence rate of 3 to 3.5 cases for 1000, or for a national population of 165 million, a total number of cases between 495,000 and 577,500. (See 1024.)

CHILDREN--GROWTH AND DEVELOPMENT

1041. Parmelee, Arthur H., Jr. (Dept. of Pediatrics, Univ. of Calif., Los Angeles, Calif.)

The developmental evaluation of the blind premature infant. Am. J. Diseases of Children. Aug., 1955. 90:2:135-139.

A report of a study to determine whether standards of developmental progress established for full-term infants can be applied to premature infants and to blind premature infants. When proper correction is made for the weeks of prematurity, these standards can be used with both groups of premature infants. Sitting without support, standing alone, and walking alone are definitely delayed in the blind premature child, seemingly because of dependence on vision for balance.

See also 1104.

CHILDREN (DEPENDENT)

1042. Miller, Margaret D. (Children's Agencies Sect., Dept. of Welfare and Institutions, 439 S. Belvidere St., Richmond 20, Va.)

Boarding care for crippled children. Virginia Welfare Bul. Apr., 1955. 32:4:4-11.

The Supervisor of the Children's Agencies Section reports how the foster home program for crippled children coming from rural areas to Richmond for medical treatment was organized and how it is administered.

CHILDREN'S HOSPITALS

1043. Davison, W. C. (Duke Univ. School of Med., Durham, N.C.)

Medical and psychological team work in the care of chronically ill children. Pediatrics. Aug., 1955. 16:2:270-271.

Reprinted from: Texas Rep. Biol. & M. 12:655. 1954.

The author briefly urges that every in-patient facility treating children should make provision for adequate attention to psychologic and educational needs.

CHRONIC DISEASE -- INSTITUTIONS

1044. Conner, James F. (Chief, Prof. Services, V. A. Center, Kecoughtan, Va.)

A hospital unit for the care of the patient with long-term illness: the intermediate service, by James F. Conner (and others). J. Chronic Diseases. Aug., 1955. 2:2:162-177.

"... An intermediate hospital unit, designated the Intermediate Service for the care of the patient with long-term illness, was described. The important features of this unit are: a) immediate availability of the resources of the acute hospital; b) informal and homelike environment especially adapted for the care of the long-term patient; c) emphasis on the team approach and multiple integrated activities. The role of each of the key members of the staff is discussed...."--Summary.

CLEFT PALATE--SPEECH CORRECTION

1045. Luban, Joseph (30 S. Broadway, Yonkers, N. Y.)

Speech and the cleft palate patient. Am. J. Orthodontics. Feb., 1955. 41:2:121-136. Reprint.

A thesis in partial fulfillment for the requirements for the certification by the American Board of Orthodontics. "The purpose of this article is to discuss some of the considerations involved in the restoration of normal speech, with particular emphasis on those factors which might be of value to the orthodontist." -- Author.

CLINICS (ITINERANT)

1046. Lynndelle, Vivian

Identification of aurally handicapped school children in Santa Clara County. California Schools. Aug., 1955. 26:8:425-429.

How Santa Clara County, California, makes use of the mobile unit for testing and identifying aurally handicapped children, mandatory since 1947. The unit is described, a typical daily schedule included, and present status of the program indicated.

COLLEGES AND UNIVERSITIES

1047. Gamble, Alice H.

Teaching by telephone on the college level. College & University Business. June, 1955. 2 p. Reprint.

School-to-home telephones, already widely accepted on the elementary and secondary schools level as a means for providing educational opportunity to the handicapped, are now in use with college students. Described is the pilot project with two homebound students of Boston University Junior College in 1952. Results with students in Louisiana, Wisconsin, and Iowa are reported as successful.

Available in reprint form from J. A. Richards, Executone, Inc., 415 Lexington ave., New York 17, N.Y.

CONGENITAL DEFECT--ETIOLOGY

1048. Penrose, L. S. (University Coll., University of London, London, Eng.)

Parental age and mutation. Lancet. Aug. 13, 1955. 269:6885:312313.

"... An attempt is made to differentiate causes of mutation by examining their relationships to parental age. The influence of the father's age is shown to be of critical significance. When the effect of the father's age on incidence is appreciable, as in achondroplasia, the hypothesis of fresh gene mutation as the cause is strengthened. When it is absent, as in mongolism, other mechanisms must be postulated. Slight increase of both father's and mother's mean ages may be shown in conditions originating in mutations caused by radiation."--Summary.

CONGENITAL DEFECT--MEDICAL TREATMENT

1049. Masters, Frank W. (1216 Virginia St., E. Charleston, W. Va.)

The surgical treatment of the common congenital deformities of infancy and childhood, by Frank W. Masters, Nicholas G. Georgiade, and Kenneth L. Pickrell. W. Va. Med. J. Dec., 1954. 50:12: 8 p. Reprint.

Many common congenital deformities of infancy and childhood are amenable to surgical repair and should be so treated to prevent the psychic and physiologic abnormalities which they often produce. Methods of reconstruction vary with type of anomaly. Optimum time for surgery depends upon the individual congenital abnormality as well as upon growth and development of the child. Aims of surgical reconstruction are the prevention of esthetic deformity and the correction of functional handicaps.

CONVALESCENCE--RECREATION--PERSONNEL See 1085.

DENMARK. THE SOCIETY AND HOME FOR CRIPPLES

1050. Denmark. The Society and Home for Cripples (34, Esplanaden, Copenhagen K., Denmark)

The Society and Home for Cripples. Copenhagen, The Society, 1955. 20 p. illus., chart.

As a Special Relief Institution, the Society and Home for Cripples has the authority and obligation to provide hospital treatment (including after-care), schooling, training, and education for cripples on behalf of the State. The cost of these services is paid for by the State; other activities, including outpatient orthopedic care, training and employment of the severely handicapped, and a holiday home for cripples, are supported by private funds. This booklet describes the program and services of the Society, and its organization and administration.

Available in the U. S. from the International Society for the Welfare of Cripples, 701 First Ave., New York 17, N.Y.

DENTAL SERVICES See 1028;1045.

DISCIPLINE

1051. Lasher, Sarah V.

The question of discipline. Crippled Child. Aug., 1955. 33:2:12-13, 27.

A mother of a cerebral palsied boy believes that discipline is just as

DISCIPLINE (continued)

necessary for the handicapped child as for the normal if he is to achieve emotional balance and learn to live in the community as a self-supporting, self-sufficient adult. Through her experiences with her own son and in group work with handicapped children, she has experienced the problems which arise from lack of discipline in training them.

DISEASE--STATISTICS
See 1105.

DRAMATICS See 1106.

DRIVERS

1052. Young, Owen Leslie (Santa Monica High School, Santa Monica, Calif.)

Driver education for the mentally retarded student. Calif. Teachers

Assn. J. Mar., 1955. 51:3:26-27. Reprint.

Explains why some changes are necessary in the course of driver instruction if the slow learning pupil is to profit from instruction.

EMPLOYMENT--BIBLIOGRAPHY

1053. National Society for Crippled Children and Adults (11 S. La Salle St., Chicago 3, Ill.)

Employment of the physically handicapped; a checklist of publications in print, compiled by the Library. Rev. Aug., 1955. Chicago, The Society, 1955. 10 p. Mimeo.

A listing of books, pamphlets and periodicals on the counseling and employment of handicapped persons; useful for interested students and professional workers.

Single copy free from the Library.

EPILEPSY

See 1061.

FACIAL PARALYSIS -- ETIOLOGY

1054. Unger, Max (36 W. 40th St., New York, N.Y.)

Bell's palsy and poliomyelitis. Eye, Ear, Nose and Throat Monthly. Aug., 1955. 34:8:501-507.

Associating the symptoms of Bell's palsy with poliomyelitis, the author here reports his research that has strengthened this belief. By injecting spinal fluid from several Bell's palsy patients into monkeys he has produced poliomyelitis in them. This paper describes these Bell's palsy cases in the humans and the findings in the inoculated monkeys.

HANDICRAFTS

1055. Girl Scouts (155 E. 44th St., New York, N.Y.)

Exploring the hand arts. New York, Girl Scouts, c1955. 118 p. illus. (Catalog no. 19-304)

Contains information on a variety of crafts, none of which requires expensive material, much time or storage space, or an expert knowledge of the arts. Chapters give instructions, basic materials needed, various

HANDICRAFTS (continued)

possibilities of each medium, tools and equipment necessary, and suggestions for projects. Possibilities for work with paper, wood, metal, glass, leather, clay, textiles, and embroidery, for bookbinding, print making, and hooked rugs are explored. An extensive bibliography of books, periodicals, films, and filmstrips is included. Intended for the Girl Scout leader, to help in planning program activities.

HEALTH SERVICES -- SURVEYS

1056. National League for Nursing (2 Park Ave., New York 16, N.Y.)

Self-survey guides for public health nursing service. New York,
The League, 1953. 8 pamphlets.

Contents: Introduction and bibliography. -I. The Community. -II. Public health nursing program. -III. Health department nursing service. -IV. Voluntary agency. -V. The combination agency. -VI. Public health nursing services for school child. -VII. Part-time industrial nursing service.

It is suggested that local communities might use these guides to study their nursing services; in addition, the guides might well be used in the public health nursing aspects of an overall study of community health services, supplementing the American Public Health Association's publication, "Guide to a Community Health Survey."

Available from The League at the following prices: Guides no. 1, 2, and 7, 30¢ each; nos. 3, 4, 5, and 6, 40¢ each. The entire set is priced at \$2.25, with reductions for quantity orders.

HEMIPLEGIA

1057. Beach, Thelma L.

Recovery from stroke. Today's Health. Sept., 1955. 33:9:36-37, 52. A daughter's personal account of her mother's experience after suffering a stroke brings encouragement and the hope of self-sufficiency to the patient who is willing to make the effort toward rehabilitation. Ways in which the family of the patient can help in recovery are suggested.

See also 1010.

HIP

1058. Kenrick, Margaret (65-42 75th Pl., Middle Village, L. I., New York)

Post-operative rehabilitation in hip arthroplastics, by Margaret

Kenrick and K. G. Hanson. Archives of Physical Med. and Rehabilitation. July, 1955. 36:7:434-438.

In same issue: Rehabilitation of cup arthroplasty, by Terry B. Jones, Carol Larson, and W. D. Paul, p. 439-445.

"A program of rehabilitating patients with femoral head replacements is offered including the following points: Importance of knowing type of approach, mode of dislocation and result of surgeon's test of stability during surgery; motions and positions to be avoided early; necessity of explaining overall regime to patient..." The graduated exercise and activities program is described.

In the second article, the authors have reviewed after 6 months to 4 years 102 cup arthroplasties. Three-fourths were rated good; one-fourth,

HIP (continued)

fair, and only two percent were rated poor. In order to improve the criteria for judging end results, it is suggested that better standards based on the psychologic make up and the physical and functional capacity of the individual be set up.

HOMEBOUND--SPECIAL EDUCATION
See 1047.

HUNTINGTON'S CHOREA

1059. Symposium on Huntington's chorea. Proceedings, Staff Meeting of the Mayo Clinic. Aug. 10, 1955. 30:16:349-370.

Contents: An educational approach to the social problem of Hunting-ton's chorea, John S. Peatson (and others). -Huntington's chorea; results of treatment with Reserpine, Jorge A. Lazarte (and others). -Intracerebral and intracerebellar electrography in Huntington's chorea, by Carl W. Sem-Jacobsen (and others).

INSURANCE (LIFE)

1060. Dolnick, Michael M. (11 S. La Salle St., Rm. 1130, Chicago 3, Ill.)
You too, can build an insurance estate. Crippled Child. Aug.,
1955. 33:2:18-21. 28.

The Statistical Research Analyist for the National Society for Crippled Children and Adults reports findings of a survey of insurance companies as to their policies in accepting cerebral palsied persons for life insurance coverage. The problem of insuring the handicapped is reviewed. The author finds that the medical problem is less important than the question of "insurable interest," that is, the applicant's need for insurance protection.

LATERALITY

See 1010.

MARRIAGE

1061. Dengrove, Edward

Should epileptics marry?, by Edward Dengrove and Doris Kulman. Today's Health. Sept., 1955. 33:9:19, 54-55.

Knowing these facts about the nature and control of epilepsy will help the undecided to face the question of marriage squarely where the disease is a complicating factor.

MENTAL DEFECTIVES

1062. New York. New York State Society for Mental Health (105 E. 22nd St., New York 10, N.Y.)

The retarded child in the community; practical suggestions for community care, by Katherine G. Ecob. New York, The Society, c1955. 22 p. 35¢.

A booklet intended for the education of the public, it discusses the nature, causes and extent of retardation, dispels some common misconceptions in regard to the characteristics and abilities of mental defectives, lists briefly conditions indicating the need for a reliable diagnosis, prognosis for the child in school, work, and behavior. Suggestions for the

MENTAL DEFECTIVES (continued)

home care, daily training, socialization, and recreation are given, along with means for relieving nervous tensions in the family of the retarded child. Community resources are discussed.

MENTAL DEFECTIVES -- DIAGNOSIS

1063. Brown, Spencer F. (8 Garden City Road, Darien, Conn.)

A note on speech retardation in mental deficiency. Pediatrics. Aug., 1955. 16:2:272-273.

The author points out that mentally retarded children may begin to use several single words at the average normal age of 12 months, and then stop using them. This behavior should be regarded as a clue to the presence of mental retardation.

MENTAL DEFECTIVES -- INSTITUTIONS

1064. Callahan, Margaret (1949 Sunnyside Ave., P. O. Box 776, El Cajon, Calif.)

Twenty forgotten children. Am. J. Nursing. Aug., 1955. 55:8:965-966.

The author, who with her husband has directed the Callahan School for Mentally Retarded the past five years, tells the rewards of working with these children. A routine day and some of the typical activities of the School are described.

MENTAL DEFECTIVES -- MENTAL HYGIENE

1065. Alford, Arthur F. (Ministry of Education, London, Eng.)

Some of the mental health aspects of mental deficiency. Mental Hygiene. July, 1955. 39:3:433-441.

A discussion of the right and wrong attitudes toward the educationally subnormal child, his needs at various stages from birth, through school life, to the time of employment. How the people who are in close contact with these children can fulfill their needs is pointed out.

1066. Heller, Arthur D.

Group therapy with mental defectives. Mental Health. Summer, 1955. 14:3:97-99.

The group psychotherapy program at the Prudhoe and Monkton Hospital (England) is reported as useful in that it provides the therapist with an opportunity for observation and "increases, in a limited number of patients, their adaptive ability and trains discipline and patience."

1067. McLachlan, D. Gilmour (Mental Hygiene Div., Dept. of Health, Wellington, N. Z.)

Emotional aspects of the backward child. N. Zealand Med. J. Oct., 1954. 53:297:480-486. Reprint.

A comprehensive article that discusses the factors that create emotional disturbances, and the principles that should be observed by parents and others in their association with the child. The author considers primarily the child who is but moderately retarded.

MENTAL DEFECTIVES -- PSYCHOLOGICAL TESTS

1068. Keller, James E. (1034 E. Huron St., Ann Arbor, Mich.)

The use of Bender Gestalt maturation level scoring system with mentally handicapped children. Am. J. Orthopsychiatry. July, 1955. 25:3:563-573.

"The development of a method of scoring B-G proctocols to assess the maturation level of the child in the visual motor gestalt function' is briefly described. The scale of 114 items which was created appears from exploratory studies to function adequately as a measuring instrument when used with a population of institutionalized mentally retarded boys. Evidence from this population also suggests that the B-G total score is sufficiently related to classroom achievement to be of value as a performance test of mental development. A method of evaluating the B-G test is illustrated by a brief discussion of the B-G protocol of a mentally retarded boy. "--Summary. A discussion of the paper by Dr. Winifred Ingram follows.

MENTAL DEFECTIVES -- SPECIAL EDUCATION See 1052.

MENTAL DISEASE

1069. Noyes, Arthur P. (Supt., Norristown State Hosp., Norristown, Pa.)

Personality disorders and their treatment. Am. J. Occupational

Therapy. July-Aug., 1955. 9:4:149-153, 181.

A review of the causes and nature of mental disorders.

MENTAL DISEASE -- INSTITUTIONS -- DIRECTORIES

1070. U. S. National Institute of Mental Health

Listing of outpatient psychiatric clinics in the United States and Territories, 1954. Washington, D. C., Govt. Print. Off., 1955. 44 p. (Pub. Health Serv. Pubn. no. 428)

This directory is intended to serve as an interim reference to be succeeded by a new directory, now in preparation as a joint publication of the National Association for Mental Health and the National Institute of Mental Health. This present directory lists the addresses of the clinics geographically by state; additional information reported by the clinics will be incorporated in the later directory.

Available from the Superintendent of Documents, Washington 25, D.C., at 35¢ a copy.

MENTAL HYGIENE

1071. Podolsky, Edward (Kings Co. Hospital, 451 Clarkson Ave., Brooklyn 3, N. Y.)

Physical ailments and the frightened child. Mental Hygiene. July, 1955. 39:3:489-497.

Dr. Podolsky explains fears generated in children by tuberculosis, diabetes, rheumatic heart disease, epilepsy, cerebral palsy and other nerve disorders, how they affect their social relationships, emotional growth, and adjustment to physical limitations.

MULTIPLE HANDIC APS See 1039;1093.

MULTIPLE SCLEROSIS

1072. Miller, Joseph (Goldwater Memorial Hospital, Welfare Island, New York 17, N.Y.)

Multiple sclerosis; knowledge of the diagnosis as a factor in rehabilitation, by Joseph Miller and Milton Tarlau. Brit. J. Phys. Med. Aug., 1955. 18:8:167-169.

Presents data obtained from answers to a questionnaire circulated by the National Multiple Sclerosis Society in regard to the value of the multiple sclerosis patient's being informed of the diagnosis and prognosis. In the author's experience successful adjustment to the disease requires a knowledge of the diagnosis, its implications, and some concept of the physiological process.

MULTIPLE SCLEROSIS--DIAGNOSIS
See 1078.

MUSIC THERAPY

1073. Myers, Allen (Iowa Hospital-School, State Univ. of Iowa, Iowa City, Ia.)

Music therapy in a hospital-school for children who have cerebral
palsy. Cerebral Palsy Rev. July-Aug., 1955. 16:4:8, 25.

The music program at the School is based on the belief that music can reach the handicapped child therapeutically as well as educationally. The adjunctive use of music with speech and occupational therapy is briefly discussed.

NEPHROSIS

1074. National Nephrosis Foundation (143 E. 35th St., New York 16, N.Y.)

Nephrosis in childhood, by Conrad M. Riley. New York, The
Foundation, c1955. 36 p.

"... This booklet is an effort to present in as nontechnical language as possible what is known about nephrosis and to give enough background of the various concepts to allow the parent some insight into why there can be such conflicting ideas within the medical profession. Also a section is devoted to describing some of the research that is in progress. The material presented is selected on the basis of experience with questions asked by parents over and over in a period of years in a busy nephrotic clinic...."--Introduction. This booklet is available to physicians for their use with parents of patients.

See also 1107.

NURSERY SCHOOLS

1075. Gipe, Florence Meda (University of Maryland School of Nursing, College Park, Md.)

The nursery school in the hospital. Nursing Outlook. Aug., 1955. 3:8:440-443.

Laboratory experience is provided student nurses at the University of Maryland through observation of children at the College Park Nursery School on the University campus. After observing the therapeutic benefits of the nursery school play program, nurses then have the opportunity to study sick children in the elementary school of the University Hospital. Results of this cooperative planning have been received enthusiastically.

OBESITY

1076, Stuart, Harold C. (55 Shattuck St., Boston 15, Mass.)

Obesity in childhood. Quart. Rev. Pediatrics. Aug., 1955. 10:3: 131-145.

Part I deals with factors in the recognition and control of obesity in children, the emotional problems of childhood which lead to overeating, constitutional factors which predispose or contribute to obesity, and the influence of home and school environment on eating habits. Part II discusses the goals and practical steps in prevention and control of obesity.

OCCUPATIONAL THERAPY See 1109.

OLD AGE--MEDICAL TREATMENT

1077. Vine, S. M.

Clinical pitfalls in the elderly. Lancet. July 16, 1955. 269:6881: 103-106.

The author reviews the medical problems found in some 600 elderly women whom he has treated in their homes in a period of 14 months. "My idea of the practical medicine of the elderly is founded on three principles: 1) The elderly shall receive the same skilled attention as younger patients do. 2) Any patient whose illness or disability begins over the age of 65 either dies or can be reabled within one year, except when advanced mental change is present. 3) A hospital is not a permanent residence...."

PARAPLEGIA--EQUIPMENT See 1101.

PARTIALLY SIGHTED See 1025;1026

PHYSICAL EFFICIENCY

1078. Kurtzke, John F. (V. A. Hosp., Bronx, N. Y.)

A new scale for evaluating disability in multiple sclerosis. Neurology. Aug., 1955. 5:8:580-583.

"A new classification of disability in multiple sclerosis is presented wherein a status number is provided in accordance with the patient's impairment due to neurologic dysfunction. The scale consists of ten progressive steps or classes. The scale has been applicable in the more than 300 patients studied at this hospital, and has proved satisfactory in measuring change in status of these patients during hospitalization. "-- Summary.

PHYSICAL THERAPY

1079. Hirt, Susanne (School of Physical Therapy, Med. Coll. of Virginia, Richmond, Va.)

What is kinesiology?; a historical review. Phys. Therapy Rev. Aug., 1955. 35:8:419-426.

"This has been an attempt to trace the origin and the development of the scientific study of human motion." The contributions to this scientific area have come from anatomy, biomechanics, physiology, basic and applied clinical science.

PHYSICAL THERAPY--PERSONNEL

1080. American Physical Therapy Association

State registration of physical therapists. Phys. Therapy Rev. Aug., 1955. 35:8:438-443.

Requirements for legal licensing or registration of physical therapists as provided by state law are listed by state. Similar legislation when enacted by additional states will be reported in the Physical Therapy Review.

PLAY THERAPY

1081. Lorenze, Edward J. (The Burke Foundation, White Plains, N.Y.)

Role of non-directive play therapy as a technic of psychotherapy in cerebral palsy, by Edward J. Lorenze and Ralph Cancro. Arch. Phys. Med. and Rehab. Aug., 1955. 36:8:523-529.

Parental attitudes which may lead to emotional maladjustment in the cerebral palsied child are considered. Ten children considered to have psychological problems resulting in specific behavior problems of speech retardation were placed on a program of play therapy; results and findings of a follow-up evaluation are discussed. The authors believe that emotional problems in cerebral palsied children are found with sufficient frequency to warrant the inclusion of psychological services as a part of the therapeutic program. Such services should include not only testing and evaluation, but actual therapy, guidance and parental counseling if they are to be effective.

POLIOMYELITIS -- DIAGNOSIS
See 1054.

POLIOMYELITIS -- FICTION
See 1108.

POLIOMYELITIS -- MEDICAL TREATMENT

1082. Knapp, Miland E. (920 S. 7th St., Minneapolis, Minn.)

The contribution of Sister Elizabeth Kenny to the treatment of poliomyelitis. Arch. Phys. Med. and Rehab. Aug., 1955. 36:8:510-517.

An objective evaluation of three important contributions to the treatment of poliomyelitis which Sister Kenny made. She emphasized muscle shortening as a cause of deformity, stressing the need for positive treatment in the early stages to prevent deformity. Sister Kenny emphasized a positive approach to treatment, with attention to the things which can be treated with hope of success, and she systematized a technic of muscle re-education based on sound physiologic principles and logical reasoning.

PROSTHESIS--PERSONNEL

1083. International Society for the Welfare of Cripples (701 First Ave., New. York 17, N.Y.)

A report on prosthetics personnel; a survey of the problems and personnel situation in the prosthetics field based on reports received from eighteen countries. July, 1955. New York, N.Y., The Society, 1955. 11 p. Mimeo.

Prepared by the Committee on Prostheses, Braces and Technical Aids.
"The Committee, recognizing the seriousness of the shortage of

PROSTHESIS -- PERSONNEL (continued)

trained personnel in the prosthetics field, circulated, last year, a questionnaire, designed to elicit general information regarding this problem. This information has been received, comparisons have been made, conclusions have been drawn and future courses of action recommended...." The survey revealed other problem areas on which information is needed, and a revised questionnaire which is being circulated is enclosed with the report.

PSYCHOLOGY

See 1019; 1032; 1097; 1104.

PUBLIC HEALTH NURSING See 1056: 1100

RECREATION -- CALIFORNIA

1084. California. Recreation Commission

Recreation for handicapped people in California. Sacramento, The Commission, 1955. 52 p. (Publ. 23)

Presented as a guide for public recreation boards and officials, this booklet offers information on the recreational needs of the handicapped, operating viewpoints and procedures of public recreation agency programs, and descriptions of selected examples of nineteen governmental programs in California. Activities described are participated in by children, youth, and adults with single or multiple injuries acquired at birth, through disease or in accidents, as well as those with mental retardation or mental deficiency.

Available from Documents Section, State Printing Office, Sacramento 14, Calif., at 50¢ a copy, plus 2¢ tax for California addresses.

RECREATION -- PERSONNEL

1085. National Recreation Association (8 W. 8th St., New York 11, N. Y.)

Suggested standards for hospital recreation personnel. New York,

The Assn., 1955. 2 p. (F 62-7-55) Mimeo.

Together with: Recreation leadership with the ill and handicapped; a service career for you. 3 p. (F 61-6-55) Mimeo.

"... Lists detailed information for the positions of hospital recreation director, leader and aide...." Qualifications are outlined for the guidance of employers, professional workers, educators, and guidance counselors.

The second leaflet identifies hospital recreation leadership as a new field of work and suggests experiences and education which prepare young people for a career in this field. The history of the development of the work in American Red Cross service to military hospitals, in Veterans Administration hospitals and state hospitals is traced.

RECREATION--RESEARCH

1086. National Recreation Association (8 W. 8th St., New York 11, N.Y.)

Research in recreation completed in 1953 and 1954. New York, The Assn., 1955. 25 p. (P 230) Mimeo. \$1.00

The first comprehensive annual listing of research in the field of recreation includes research reports in the areas of activities, leadership

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RECREATION -- RESEARCH (continued)

and personnel, finance, community surveys and areas, facilities and structures. Studies in physical education and group work are listed if they specifically relate to recreation. In the section, "Recreation for special groups," there are 5 references to research relating to the aged and handicapped. Listings are alphabetical under the various subject headings. Research studies include master's theses and research leading to a doctor's degree.

REHABILITATION

1087. Elton, Frederic G. (28 E. 21st., New York, N.Y.)

Rehabilitation, the place and relationship of services. Bul., American Rehabilitation Committee. July, 1955. 4:1:1-7.

"It will be noted that the rehabilitation process, as explained calls for a continuous, uninterrupted and interlocked series of services necessary to meet the individual needs of each patient, directed towards returning each to economic and social life just as speedily as it is scientifically possible to do so. This process has three major parts,--Medical, Convalescent or Conditioning and Vocational..."--Author.

See also 1105.

REHABILITATION--DENMARK See 1050.

REHABILITATION--GREAT BRITAIN

1088. Great Britain. Standing Committee on the Rehabilitation and Resettlement of Disabled Persons.

Services for the disabled. London, H. M. Stationery Off., 1955. 88 p. illus.

Presents a concise and factual account of provisions now made in Great Britain for the rehabilitation and resettlement of the disabled. A brief historical review of progress in rehabilitation work is given. Medical, employment, and other social services, as administered by governmental and voluntary agencies, are described. Special problems arising in the various categories of the disabled and their management are discussed. Included in the appendix are listings of organizations concerned with rehabilitation, sheltered employment, vocational training, and voluntary services for specific disabilities.

Certain of the reports prepared by other organizations for Committee review were indexed in the <u>Bulletin on Current Literature</u>, April, 1955, #403; Oct., 1954, #1062; and Sept., 1954, #982.

Available in U. S. from British Information Services, 30 Rockefeller Plaza, New York 20, N.Y., at 4s 6d (86¢) a copy.

REHABILITATION--PROGRAMS

1089. Rusk, Howard A. (400 E. 34th St., New York 16, N.Y.)

Global understanding through rehabilitation. Crippled Child. Aug., 1955. 33:2:4-6.

Dr. Rusk, who has had opportunity to see first hand the results which can be achieved in international understanding through rehabilitation

REHABILITATION -- PROGRAMS (continued)

and services to the handicapped, tells of some of the work being done in other countries, the economic and political value of such services, especially in the underprivileged countries, and the cooperation developed by international health agencies. These improved health standards are seen as a vital contribution to world peace.

REHABILITATION -- SURVEYS -- MISSOURI

1090. Wahl, Amelia

Rehabilitation is up to date in Kansas City. J. Rehabilitation. May-June, 1955. 21:3:4-6, 29, 30.

A community survey on rehabilitation needs in the four-county area of Greater Kansas City, how it was organized and is being conducted, is reported. Since the study is only in its initial stages, findings and conclusions are not available at this time. The study is being financed by Community Studies, the U. S. Public Health Service, the federal Office of Vocational Rehabilitation, and certain Kansas City health organizations.

REHABILITATION CENTERS See 1103.

SCLEROSIS -- BIOGRAPHY

1091. Disseminated sclerosis from an orthopaedic angle. Physiotherapy. July, 1955. 41:7:214-215.

The author, a physical therapist, is also the patient described in the article. The factors helping her toward greater mobility are: "1. The measures taken and maintained to prevent deformities. 2. The mechanical aid to walking given by satisfactory splints. 3. Use of an electrically-operated chair. "--Summary.

SOCIAL SECURITY ACT

1092. U. S. Social Security Administration (Washington 25, D.C.)

The social security act; the first twenty years. Social Security Bul. Aug., 1955. 18:8. 32 p. Reprint.

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Contents: The social security act; the first twenty years, Charles I. Schottland. -Social security objectives and achievements, Wilbur J. Cohen. - Social security protection, 1935-1955. -Old-age and survivors insurance after twenty years, Victor Christgau. -Twenty years of public assistance, Jay L. Roney. -Twenty years of progress for children, Martha M. Eliot. - Significant events, 1935-1955. -References on the origin and development of social security in the United States.

SPECIAL EDUCATION--SURVEYS--ILLINOIS

1093. Illinois. Chicago Public Schools

The needs of physically handicapped children; report of a survey of Chicago's special schools, April 1, 1954. Chicago, The Schools, 1954. 31 p. tabs.

Physically handicapped children in Chicago's four special elementary schools and one special high school were surveyed in an attempt to appraise the current program and chart their needs. Data reveal great diversity of physical handicaps, with cerebral palsy accounting for the

SPECIAL EDUCATION--SURVEYS--ILLINOIS (continued)

largest group. Mental handicap was found to be several times more prevalent in the physically handicapped group than in a normal group. The questions of who should attend a special school, for how long a period, and for what specific reasons are considered.

Available upon request from the Chicago Board of Education, Room 210, 228 N. La Salle St., Chicago 1, Illinois.

SPEECH CORRECTION

See 1032; 1063.

SPEECH CORRECTION--TENNESSEE

1094. McConnell, Freeman (Vanderbilt Univ. Sch. of Medicine, Nashville, Tenn.)

New developments in speech and hearing rehabilitation in Tennessee. Tenn. Pub. Welfare Record. Aug., 1955. 18:4:63-67.

In 1955 the Tennessee General Assembly approved a one-million dollar bond issue for the construction of a new building for the Bill Wilkerson Hearing and Speech Center. The Director of the Center reviews the history of the Center and describes the expanded program that is to be provided.

SPEECH CORRECTION--INSTITUTIONS--OHIO

1095. Fortune, George J. (The Cleveland Hearing and Speech Center, Western Reserve Univ., Cleveland 6, Ohio)

The Cleveland Hearing and Speech Center. J. Rehabilitation. May-June, 1955. 21:3:7-10.

Discusses the administration, financial support, programs of therapy, special programs of recreational and social rehabilitation, the training of personnel, health education services, research, and future plans of the Cleveland Hearing and Speech Center on the campus of Western Reserve University.

SPINAL CORD--MEDICAL TREATMENT

1096. Martin, John (Walter Reed Army Hosp., 6825 16th St., N.W., Washington 12, D.C.)

The early care of patients with injury of the spinal cord, by John Martin and Iris Craig. Am. J. Nursing. Aug., 1955. 55:8:936-939.

Discusses surgical care of the open or closed injury at the cervical, thoracic, or lumbosacral level, as well as the general nursing care, initial treatment, the problems of elimination, nutrition, use of drugs, positioning, and emotional support.

STUTTERING

1097. Sheehan, Joseph G. (Dept. of Psychology, Univ. of Calif., Los Angeles 24, Calif.)

Level of aspiration in stutterers and nonstutterers, by Joseph G. Sheehan and Seymour L. Zelen. J. Abnormal and Social Psychology. July, 1955. 51:1:83-86.

Methods and results of a study of the level of aspiration in stutterers and nonstutterers are discussed. The authors state that the defensive nature of stutterer's symptom and the significance of unadaptive goals in

STUTTERING (continued)

the psychology of stuttering suggest that stutterers may differ from nonstutterers in goal-setting behavior. It was found that stutterers were significantly lower in average D score, or discrepancy between aim and and accomplishment; they ranged more widely in their aspirations and succeeded more frequently. In general they showed a lower level of aspiration. To a greater extent than the normal population, stutterers avoid even the threat of failure.

SWIMMING

1098. American National Red Cross (Washington 13, D.C.)

Swimming for the handicapped; instructor's manual. Washington, D.C., Am. Natl. Red Cross, c1955. 59 p.

Based on experience gained from a program begun in 1945 for handicapped veterans and servicemen, this manual includes background information on the general physiological and psychological values of such a program, lists facilities and equipment needed, and gives information to help instructors understand and teach the handicapped. Described in some detail are specific programs for various conditions.

The appendix contains information on the operation of the program, pictorial display of joint motions, and a glossary. Valuable to the professional worker with the handicapped, as well as to swimming instructors.

TUBERCULOSIS -- MENTAL HYGIENE

1099. Warren, Sol L. (N. Y. State Div. of Vocational Rehabilitation, State Office Bldg., Albany 1, N. Y.)

Psychological aspects of tuberculosis. J. Rehabilitation. May-June, 1955. 21:3:11-13, 28-29.

Psychological factors are at least as important as physical and environmental factors in the onset, treatment, and after-care of the tuber-culous. The writer discusses the psychological elements in tuberculosis rehabilitation--reactions to diagnosis, to hospitalization and treatment, and to adjustment after discharge. The role of the rehabilitation counselor in meeting the problems of the tuberculous patient is examined.

TUBERCULOSIS -- NURSING CARE

1100. National Tuberculosis Association (1790 Broadway, New York 19, N.Y.)

Tuberculosis handbook for public health nurses, by Jean South. New
York, The Association, c1955. 85 p.

In spite of the phenomenal changes in treatment resulting from developments in antimicrobial therapy, the decline in the number of new cases has been discouragingly slow, and tuberculosis still constitutes a major public health problem in many sections of the U. S., a concern to all public health nurses. This 1955 revision explains the role of the public health nurse in the prevention and control of the disease and in the nursing care of patients in the home.

TYPING

1101. Clifton, Earl (Manual Arts Therapy, V. A. Hosp., Long Beach, Calif.)

Typewriter reverse feed actuator for quadriplegic use, by Earl

Clifton and John H. Wagner, Jr. Arch. Phys. Med. and Rehab. Aug.,
1955. 36:8:503-506.

"A simple attachment for a standard mechanical typewriter is described which made it possible for a quadriplegic patient to turn the platen in a reverse direction. This has enabled him to operate the machine without assistance."--Summary. A mechanical description of the component parts of the actuator and its attachment to the typewriter is given.

ULTRASONICS

1102. Rubin, David (363 N. Kings Rd., Los Angeles 48, Calif.)

Use of ultrasonic vibration in the treatment of pain arising from phantom limbs, scars and neuromas: a preliminary report, by David Rubin and John H. Kuitert. Archives of Phys. Med. and Rehabilitation. July, 1955, 36:7:445-452.

"Ultrasound vibrations used in intensities of 1 w/cm 2, with few exceptions, for short periods of time on a daily treatment basis have effectively relieved the pain and tenderness of phantom limb, neuroma, and scar origin. In a series of 35 patients...23 reported complete relief, 9 reported the persistence of only slight residual pain, and 3 reported no relief. The reasons for considering the pain relieving effects of ultrasound as mechanical rather than thermal have been advanced. "--Summary.

WORKMEN'S COMPENSATION

1103. Allan, W. Scott (Liberty Mutual Ins. Co., Boston, Mass.)

Target for today in workmen's compensation. J. Rehabilitation. May-June, 1955. 21:3:14-19, 30.

"...Readers will welcome this clear statement of the philosophy which underlies the rehabilitation centers maintained by Liberty Mutual in Boston and Chicago. These pilot plants have attracted the attention of observers from all over the world."--Editor's note.

New Books Briefly Noted

CHILDREN--GROWTH AND DEVELOPMENT

1104. Valentine, C. W.

Parents and children; a first book on the psychology of child development and training. New York, Philosophical Library, 1955. 212 p. \$3.75.

This book, intended primarily for parents, covers the main facts and principles about the mental development and training in childhood, and their application to everyday problems of family life. The author, father of five children, is Emeritus Professor of Education, University of Birmingham, Eng.

DISEASE -- STATISTICS

1105. National Health Education Committee (405 Lexington Ave., New York 17, N.Y.)

Facts on the major killing and crippling diseases in the United States today; heart diseases, cancer, mental illness, arthritis, blindness, neurological diseases, and other health problems. New York, The Committee (1955), various paging, charts, tables. Planographed. Spiral binding.

Contains pertinent information on causes of the various diseases, statistical data on mortality, number suffering from disease, economic loss, medical cost, present status of care and facilities, research in progress and needs of patients. Material presented was assembled from information supplied by the voluntary health agencies interested in these specific diseases, by the National Institutes of Health of the U. S. Public Health Service, the National Office of Vital Statistics, and other voluntary and governmental agencies.

In addition, a section on disability and rehabilitation outlines the extent of disability, its effect on the economic life of the country, facilities available for treatment, cost of services, need for personnel and continued research.

DRAMATICS

1106. Jones, Elizabeth Orton

How far is it to Bethlehem? Boston, Horn Book, 1955. 38 p. illus. Crippled children at the Crotched Mountain Rehabilitation Center in New Hampshire gave a Christmas pageant, despite the handicaps they had to overcome. Because so much had been given them, they wished to give in return. The author, who volunteered her services to paint murals in the wards of the Center, shared in many of the children's activities of which the pageant was one. She tells this simple Christmas story with a feeling of reverence for the joy which these children radiate in their sharing with others.

The format and decorations of this little book are by the author, who is well known as an illustrator of children's books. (See <u>Bulletin on</u> Current Literature, Feb., 1955. #137.)

Distributed by The Horn Book, 585 Boylston St., Boston 16, Mass., at \$1.50 a copy.

NEPHROSIS

1107. National Nephrosis Foundation (143 E. 35th St., New York 16, N.Y.)

Proceedings of the sixth annual conference on the nephrotic syndrome; edited by Jack Metcoff. New York, The Foundation, c1955.

271 p. illus. Spiral binding.

(Conference) held at Western Reserve University School of Medicine, Cleveland, Ohio, November 5-6, 1954.

Papers from the Conference cover studies of the normal structure of the renal glomerulus, serum complement, renal lesion of the Schwartzman reaction, renal mechanism of hypertension, salt retaining adrenal cortical steroids, therapy of the nephrotic syndrome, and report of work in progress.

POLIOMYELITIS -- FICTION

1108. Cheney, Cora

Key of gold. New York, Henry Holt and Co., c1955. 127 p. \$2.25. After an attack of polio, Edward persuades his family to take him to Florida where his father can give him swimming treatments in the warm water, in the hope that he might walk again. He meets a new friend, weathers a hurricane, and regains the use of his legs. Young children will enjoy this easy-to-read fishing story, spiced with a touch of mystery, and its dreams of pirate ships and sunken treasure.

WORLD FEDERATION OF OCCUPATIONAL THERAPISTS--PROCEEDINGS 1109. World Federation of Occupational Therapists

Proceedings of the First International Congress, Edinburgh, 16th to 21st August 1954. Edinburgh, C. J. Cousland & Sons, Ltd. (1955). 112 p.

At the opening session, Miss M. B. Fulton, President of the Federation, and representatives of the 10 founder associations reported on "Occupational Therapy Round the World." The rest of the week was devoted to sessions on tuberculosis, poliomyelitis, psychiatry, cerebral palsy, rehabilitation and resettlement, training of occupational therapists, plastic surgery and neurology. The papers, discussions and reports that comprise these proceedings are given.

The proceedings are distributed in the U. S. by the American Occupational Therapy Association, 33 W. 42d St., New York 36, N. Y., and the International Society for the Welfare of Cripples, 701 First Ave., New York 17, N. Y., at \$1.00 a copy, paperbound.

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- 3. "Understanding Yourself As A Member of the Family."

 By Edith G. Neisser, Child Guidance Editor for Field Enterprises, Inc.
- 4. "Self-Understanding for Community Living."

 By Boyd McCandless, Ph.D., the Institute of Child Welfare of the University of Iowa
- 5. "Effects of a Handicap on Emotional Growth."

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